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DEVELOPMENT PLAN

THE MASSACHUSETTS GENERAL HOSPITAL

BOSTON, MASSACHUSETTS

December 1, 1973

## DEVELOPMENT PLAN

### THE MASSACHUSETTS GENERAL HOSPITAL

#### BOSTON, MASSACHUSETTS

#### I. INTRODUCTION

The Massachusetts General Hospital is a non-profit teaching general hospital located in the west end of Boston in an area of 19.3 acres bound by Blossom Street on the north and east, by Cambridge and Fruit Streets on the south, and by Charles and North Grove Streets on the west.

The growth of the Hospital has been one of nearly constant change since 1823, when the Bulfinch Building was completed on the original 4 acre site chartered by the Commonwealth. At that time, the tidal basin of the Charles River abutted this original building and served as the western boundary of the 4 acre site. By 1863 a new sea wall had been built and the river flats had been filled in to provide additional land to the west, on which a num-



ber of small pavilions were constructed and demolished through 1901. The pavilions, at the time, represented the latest concept in patient care facilities. None of the original buildings, built during that period, remain today. In their place stand the George Robert White Building, Baker Memorial, Phillips House, Surgical and Special Services Building, Warren Building, as well as the Cancer Management Center now under construction.

The old Harvard Medical School was located immediately to the south of the original site in the area of the existing entrance ramp to the White Building. This property was purchased in 1909 and demolished in 1911 to make way for the continuing development of the land along the north side of Fruit Street. The present Clinics Building had been erected by 1901 on land acquired in 1898. The Moseley Building was erected in 1914. Beginning in 1909, the Hospital continued with the purchase of land between Fruit and Cambridge Streets on both sides of North Grove Street with the final purchase being made in 1941. Two recently completed parking structures now stand on these sites.

In the period 1921 to 1943, the old residential property on the north side of Parkman Street was purchased in parcels by the Hospital. Most of these buildings were razed when purchased with only 30 Blossom Street and 17, 19, and 21 Parkman Street standing until January of 1973, when they were demolished. With the acquisition of this group of properties, the entire block between



Blossom Street to the north and east, Charles to the west, and Fruit and Parkman Streets to the south evolved as the primary locus of The Massachusetts General Hospital as it stands today.

## II. DEVELOPMENT PLAN: GENERAL CONCEPTS

In order to continue to be a responsible provider of health care, The Massachusetts General Hospital has had to plan for continued development. The Hospital's site is closed to the north and east by the development of the West End Urban Renewal Project. On the southwest, the Suffolk County (Charles Street) Jail continues to influence planning for the future needs of the Hospital. The primary focus of current development activity has been focused in the area bounded by No. Anderson Street, Parkman Street, Blossom Street and Cambridge Street.

Additional activity has taken place on sites not contiguous with the present Hospital area. These include acquisition, land clearance and/or rehabilitation of properties meeting both short range and long range goals of the Hospital.

These development activities include 20 Charles Street, converted to a nurse's teaching and residential facility; the Nashua Street Parking facility; the parking garage at 248-270 Cambridge Street; and the properties at 14 Garden Street and 9 and 11 Irving Street, used by the Hospital as a workshop.

Recognizing the need for additional facilities within these areas, but also the impact of this activity on the adjacent com-

munity, the Hospital has reevaluated these activities to determine how its development objectives can be coordinated with the objectives of the surrounding community and the needs of the City to produce an overall development plan which meets the objectives of all. Accordingly, the Hospital has participated in the formation of the Cambridge Street Community Development Corporation. The other participants in the Corporation are the Massachusetts Eye and Ear Infirmary, and the Beacon Hill Civic Association, representing the surrounding residential community.

The purpose of this Corporation is to create a development plan for the Cambridge Street area which, through the cooperation of each of the three participants, produces a better development in that area than either could achieve independently. Under the by-laws of the organization, each of the three participants is an equal party in planning and development activity; and each has a veto over any proposal.

For the Hospital's part, it looks forward to the consolidation of its development activities of the past into a land area through new construction within the No. Anderson Street, Parkman Street, Blossom Street, Cambridge Street block. The Hospital facility to be located on this site is an Ambulatory Care Center. The impetus to develop this facility derives from: the demands of federal and state governments on health care facilities to place greater emphasis on providing improved ambulatory care to



the public; and from a recognition by the MGH that it must reorganize and upgrade its ambulatory care programs and facilities.

Although the MGH has a long and outstanding tradition of providing ambulatory care, there are existing conditions which currently serve to inhibit the Hospital's ability to provide a timely and appropriate level of ambulatory care. First, the primary physical facilities used to provide ambulatory care at the MGH are inadequate and/or inappropriate. The MGH Clinics Building was built in 1901 and is grossly inadequate by present standards to the extent that it does not warrant major renovation. The Warren Building houses a substantial number of active medical staff, but it was not originally designed for this purpose and is, therefore, a makeshift arrangement. Second, the physicians of the MGH who provide ambulatory care are housed not only in the Clinics and Warren Buildings, but are scattered throughout the entire complex. The location of these physicians in settings which are not proximal to one another or to the necessary diagnostic support services is not conducive to the effective delivery of ambulatory care. Finally, there is a need to develop a new generation of physicians who are trained in internal medicine and who will be able to meet the primary health care needs of patients and direct them through the system.

It is the belief of the MGH that the construction of the Ambulatory Care Center--in conjunction with the development of new patterns of ambulatory care delivery--will provide the proper physical setting which will in turn: facilitate recruitment of an adequate number of primary care physicians; and enable a significant portion of the MGH physician staff to be located in one physical facility which would prove more effective than current arrangements by reaching new dimensions of timely and accessible ambulatory care.

The development of this facility would be undertaken through the Cambridge Street Development Corporation in order that the new facility be of maximum compatibility with the interests of the Beacon Hill Community and the Massachusetts Eye and Ear Infirmary.

In turn, the Hospital looks forward to incorporating some of its past acquisitions into parcels of land on which the Development Corporation would develop new housing, new recreation space and new commercial facilities serving the residential community. The present state of this planning is set forth in the October 1973 Progress Report of the Corporation.

### III. DEVELOPMENT PLAN: SPECIFIC DEVELOPMENT ACTIVITIES

#### 1. Completed Development Activity

A table of dates of acquisition, costs of acquisition



and costs of demolition, arranged by property, is attached as Appendix I. Parcel numbers refer to the designations on development plan map S-I.

- a. Parcel 18, 20 Charles Street. At the time of purchase in 1959, this property was a hotel. It was non-competitive and a losing business because of such obsolete features as its lack of air-conditioning facilities. It has been rehabilitated to serve as a student nurse dormitory through the installation of new boilers, new lighting, new elevators, and new furnishings. The first floor bar and meeting rooms have been converted into classrooms and recreation rooms for nurse's training.
- b. Parcel 19, Nashua Street Parking Lot. This property was a railroad yard formerly owned by the Boston and Maine Railroad. At the time of purchase, it was an abandoned and obsolete area, with trackage removed and platforms deteriorated and useless. The Hospital expended funds to remove deteriorated platforms and grade and hardtop the area. The property is maintained by the MGH as a parking lot. For the foreseeable future this facility is essential to the operation of the Hospital. The parking facility is necessary to accommodate the large staff of the Hospital. The parking



facility operates at maximum capacity and a two-month waiting list exists to obtain a parking permit. Until such time as a better mass transportation system is available, the parking facility is an essential component of the Hospital's physical plant.

- c. Parcel 19A, Massachusetts Rehabilitation Hospital Site. This parcel was originally part of the above larger area previously used for railroad purposes. The property is the location of the above hospital, a non-profit organization, which provides extended care services for those patients no longer requiring intensive hospital care.
- d. Parcel 8, Blossom Street (Northeast). This property was an open site and was purchased from the City of Boston in April 1964. It had been created as useable land area when the routing of Blossom and old Allen Street was changed in the planning of the Charles River Park.
- e. Parcels 9 through 17, Parking Structures. These parcels were acquired and demolished in order to create the two off-street parking structures now existing on either side of North Grove Street. They are as follows:

Parcel No. 9: 4 and 16 No. Grove Street.

Both properties were demolished in 1959. The Massachusetts General Hospital had owned these buildings since 1954 and had kept them in use as dormitory facilities. Both buildings became obsolete with the completion of a new dormitory (Bartlett Hall) and were demolished in 1959 as blighted property.

Parcel No. 10: 12 No. Anderson Street.

Demolished in 1960 as a blighted residence.

Parcel No. 11: 14 No. Anderson Street

Demolished in 1960 as a blighted residence.

Parcel No. 12: 16 and 18 No. Anderson Street.

Demolished in 1960 as blighted residences.

Parcel No. 13: 30 No. Anderson Street.

Demolished in 1956 as a blighted residence.

Parcel No. 14: 26 and 28 No. Anderson Street.

Demolished in 1956 as blighted residences.



Parcel No. 15: 22 No. Anderson Street.

Demolished in 1956 as a blighted residence.

Parcel No. 16: 24 No. Anderson Street.

Demolished in 1956 as a blighted residence.

Parcel No. 17: 20 No. Anderson Street

Demolished in 1956 as a blighted residence.

The total capacity of both these parking structures is 1,487 spaces.

2. Contemplated Development Activity

- a. The property indicated on the Development Plan Maps-1 as Present Shop Building is part of Parcel 3 in the CSCDC plans. As indicated in the Corporation's Progress Report, it would be desirable for the Hospital at some future date to relocate this shop to allow its reuse in support of the residential district. No credit under Section 112 of the Federal Housing Act is therefore anticipated.
- b. The property indicated as Present Parking Garage in Map S-1 is part of Parcel 4A in the CSCDC. The Hospital plans to convert this property to residen-

tial use, to be developed by the CSCDC. This conversion is a major feature of the Hospital's plan to consolidate its development so as to maximize residential development within the Beacon Hill community.

As reported in the CSCDC Progress Report, page 23:

"CSCDC proposes that new housing and a re-designed playground be constructed on Parcel 4A. Assuming market feasibility, a modest amount of new retail space would be included in the scheme, along the ground floor of the Cambridge Street frontage."

Since the reuse of this acquisition would not be for Hospital services, no credit for this property will be requested.

- c. The block bounded by Blossom, Parkman, North Anderson and Cambridge Streets, known as Parcel 4B in the CSCDC plan, has been partially assembled by the Hospital. The properties already acquired are:  
  
Parcel 1: 16-18 Blossom Street, the former West End House. When purchased in June, 1965, this property was a vacant building formerly used as an athletic and activities center but obsolete



for this function. It had been utilized in its earlier days by residents of the West End and the Beacon Hill residential communities. The MGH has renovated the first floor for office space for child research studies and interview rooms and modified the basement for medical engineering offices and a repair shop.

Parcel 2: 24 Blossom Street (Winchell School). When purchased in 1963 this property was a deteriorated, obsolete and closed elementary school building owned by the City of Boston. The building was sound, structurally, but had been poorly maintained. On the interior, toilets were in very bad shape, the heating system was worn out and wiring was in poor condition. On the exterior, the brownstone trim had eroded, roofing was in fair condition. The grounds were either gravel surfaced or black-topped to serve as playgrounds for the students. The property has been completely renovated to provide an educational building for The Massachusetts General Hospital School of Nursing.

Parcel No. 3: 15-17 No. Anderson Street.

When demolished in November of 1958 the property was a blighted residence and useless for any other occupancy.

Parcel No. 4: 33 No. Anderson Street.

When demolished in October of 1965, the building was in a state of collapse and was declared unsafe by the City of Boston.

Parcel No. 5: 38 Parkman Street.

When demolished in October of 1965, this property was in a state of collapse and declared unsafe by the City of Boston.

Parcel No. 6: 5 Bridge Court.

This property was a blighted residence and was demolished in June of 1959.

Parcel No. 7: 7 Bridge Court.

This property was a blighted residence and was demolished in April of 1958.



The parcels not yet acquired are included in the Development Plan area for which credit is claimed and are eligible by virtue of the presence of the following factors:

- a) Unsafe, poorly designed streets (No. Anderson and Parkman Streets and Bridge Court)
- b) Obsolete building layouts
- c) Overcrowding of structures of the land
- d) Introduction of mixed uses such as parking lots and spas
- e) General characteristics of obsolescence

The remaining parcels, surveyed from the exteriors, are:

Parcel No. 20: 11-13 No. Anderson Street.  
Buildings are obsolete; in fair condition.

Parcel No. 21: 19 No. Anderson Street.  
Building is obsolete; in fair condition.

Parcel No. 22: 23-25 No. Anderson Street.  
Buildings are in fair condition. Mixed uses have been introduced.

Parcel No. 23: 6 Bridge Court.

Building is leaning and in poor condition.

Parcel No. 24: 8 Bridge Court.

Vacant lot.

Parcel No. 25: 27 No. Anderson Street.

Building is in fair condition.

Parcel No. 26: 29 No. Anderson Street.

Building is in fair condition.

Parcel No. 27: 31 No. Anderson Street.

Building is in fair condition.

Parcel No. 28: 10-12 Blossom Street.

Buildings are in poor condition.

247-239 Cambridge Street.

Structures are unsuited to the neighborhood unless incorporated through new design into an overall plan for the block.

8 Blossom Street.

Buildings are in fair condition; include mixed uses.



When completely assembled, the Hospital intends to use approximately half this block, or roughly the percentage it already owns for a major new Ambulatory Care Center of about 300,000 gross square feet. The Center will provide a comprehensive range of diagnostic and treatment services. Some of the services are currently housed in present buildings, while other new functions would be initiated in this building. The center will be a unique blend of traditional doctor's offices, clinics, and group practices meeting the general service goals expressed above.

In conjunction with this facility, it is contemplated that 120,000 gross square feet of hotel space might be constructed on an adjoining part of the parcel. A commercial hotel chain would probably develop and manage the hotel. Many rooms would be used by ambulatory patients coming to the Hospital for tests to be taken or for treatments which do not require constant nursing care. The advantages from such a patient-oriented hotel are numerous: overnight accommodations at less-than-hospital rates, a convenient location for walking to the clinics and other Hospital facilities, a tax-paying building, and a land use compatible with the immediate environs.

On the remaining portion of the parcel, thought is being given to an indoor recreational facility as well as

some small amount of commercial space.

The entire block is conceived of as a tax producing property.

The Hospital's current thinking is that the Ambulatory Care Center can be of maximum utility if it is located on the area of Parcel 4B represented by the cross-hatched shading on Map S-1. Situated in this fashion, it will have an ideal relation to parking facilities as well as the adjacent medical facilities, which will act as resources to the center.

The only changes which will have to be made to the street layout concern the roads adjacent to the redevelopment parcel. The changes in street layout could range from the construction of a new street, such as the extension of Fruit Street, to widening and signalization.

Zoning, with the exception of the redevelopment parcel which is generally bounded by Cambridge, Blossom, Anderson and Parkman Streets will remain at its current designation.

The redevelopment parcel is currently zoned L-2. It is proposed that this zoning be changed when redevelopment takes place so as to be in conformity with the adjacent areas and the proposed reuses.

The proposed changes contained in the Development Plan including zoning, street modifications and new land uses



will be compatible with conditions and uses in the adjacent West End Project Area.

The ultimate location of the center on the Parcel, however, will be the result of planning for this parcel and the adjacent parcel 4A, undertaken by the Cambridge Street Development Corporation. This planning program is now fully underway. The Corporation has hired a director and engaged an urban planner and designer to develop a comprehensive plan for both parcels. It has actively solicited public interest in this planning process, holding two public meetings and canvassing the Beacon Hill area. The resulting plan will be reviewed by the Beacon Hill Historic Commission.

As currently envisioned, the development activities on both parcels might be carried out by a Chapter 121A corporation with eminent domain powers. In order to achieve such a designation, the development plan would, therefore, have to go through a set of reviews with the Boston Redevelopment Authority.

Under this plan, acquisition will be carried out by the Hospital, CSCDC, or the 121A corporation. Development of the Center portion of Parcel 4B will be undertaken on a non-profit basis. The remaining facilities on the site may be carried out on a limited dividend basis.

The Hospital has agreed to involve itself in such an

arduous planning process because it intends to create a Center which will be of the greatest possible benefit to the surrounding community. The result of this commitment is that the Development Plan can only state generally the Hospital's objectives for the site. The uses represented on Map S-1 are those currently envisioned. Final designation of land uses awaits completion of the full planning process, culminating in approval by the Boston Redevelopment Authority of a Chapter 121A corporation application.

Should the planning process not result in a proposal which the three parties in the corporation can consent to or which does not get Boston Redevelopment Authority approval, the Hospital will continue to use Parcels 1 and 2 of Map S-1 for hospital purposes and will request credits for these properties on this basis.

The distribution of eligible Section 112 credits would, of course, be changed to reflect the pattern of hospital land uses. Accordingly, the Hospital has indicated in Appendix I all costs already incurred in Parcel 4B as well as those it anticipates incurring. It proposes that this plan be accepted as the basis for credit certification of Parcel 4B at the time of financial settlement of the West End Land Assembly and Redevelopment Project. At that time, it will submit a statement of its progress in further de-



fining and implementing the document, together with a final statement of eligible costs for Section 112 certification. So long as this plan does not substantially differ from the objectives of this development plan, it proposes that these costs be accepted as the Hospital's donation to the local share of Boston's urban renewal program.

#### IV. SUMMARY

Although additional and more detailed planning remains to be done in relation to the Development Plan, the Hospital respectfully submits that the Plan, in its present form, together with the Appendix and Map, adequately defines the objectives of the Hospital and its general plans for future expansion and construction.

The Hospital's plans have been designed to fit within the context of a larger development plan for the Cambridge Street area. Their ultimate success is contingent upon the success of this larger endeavor, as it is carried out by the Cambridge Street Development Corporation. It is the hope of the Hospital officials that its proposals will be part of a larger solution to development possibilities on Cambridge Street, arrived at by all the parties making up the Cambridge Street community. The presentation of this Development Plan evidences the willingness of the Hospital to join with the City and other institutions and groups in the

Cambridge Street community to bring about the enhancement of the area.



APPENDIX I

THE MASSACHUSETTS GENERAL HOSPITAL

112 CREDIT PROPERTIES WEST END URBAN RENEWAL PROJECT

<u>ITEM NO.</u>	<u>PROPERTY</u>	<u>DATE PURCHASED</u>	<u>PURCHASE PRICE</u>	<u>DEMOLITION COSTS</u>
1	16-18 Blossom St. (West End House)	June, 1965	\$401,396.60	--
2	24 Blossom St. (Winchell School)	August, 1963	125,941.65	--
3	15-17 No. Anderson St.	November, 1958	31,200.88	Not Known
4	33 No. Anderson St.	October, 1965	29,598.59	Not Known
5	38 Parkman St.	October, 1965	7,149.42	Not Known
6	5 Bridge Court	June, 1959	6,633.00	Not Known
7	7 Bridge Court	April, 1958	5,933.00	Not Known
8	Lot at northeast corner of site on Blossom Street	April, 1964		--
9	4 and 16 No. Grove St.	1954	32,057.15	\$5,885.00
10	12 No. Anderson St.	October, 1960	22,186.19)	
11	14 No. Anderson St.	January, 1958	13,133.50)	5,000.00
12	16-18 No. Anderson St.	November, 1957	26,186.79)	
13	30 No. Anderson St.	January, 1956	13,142.60	1,200.00
14	26-28 No. Anderson St.	June, 1953	22,385.00	2,400.00
15	22 No. Anderson St.	December, 1955	11,763.25	1,200.00

Appendix I (cont.)

<u>ITEM NO.</u>	<u>PROPERTY</u>	<u>DATE PURCHASED</u>	<u>PURCHASE PRICE</u>	<u>DEMOLITION COSTS</u>
16	24 No. Anderson St.	July, 1956	\$ 13,332.50	\$ 1,200.00
17	20 No. Anderson St.	November, 1948	12,128.00	1,200.00
18	20 Charles St.	1959	420,706.04	--
19	Nashua St. Parking Lot	1965	1,222,523.28	--
19A	Mass. Rehabilitation Hospital.	1965	623,567.00	--
20	17-21 Parkman & 30 Blossom St.	Prior to 1948	--	15,600.00
TOTAL			\$3,040,964.44	\$33,685.00

On this matter of the properties pending acquisition, it is estimated that the total purchase prices for all such properties should total about \$2,140,000 based on current market values. As noted earlier, at the time of final settlement of the West End Land Assembly and Redevelopment Project, final acquisition costs of those subject properties acquired at that time will be submitted for purpose of computing the exact 112 credits involved.

RESOLUTION OF THE BOSTON REDEVELOPMENT AUTHORITY  
RELATIVE TO CERTAIN FINDINGS CONCERNING THE  
MASSACHUSETTS GENERAL HOSPITAL DEVELOPMENT PLAN  
DATED DECEMBER 1, 1973, AS AMENDED

WHEREAS, the Boston Redevelopment Authority (hereinafter called the "Authority"), is a public body, politic and corporate, duly organized and existing under Chapter 121B of the Massachusetts General Laws (Ter. Ed.), as amended, within the City of Boston, Massachusetts; and

WHEREAS, the Authority is the local public agency for the purpose of undertaking urban renewal activities and the Authority is the Planning Agency for the City of Boston; and

WHEREAS, the Massachusetts General Hospital (hereinafter referred to as the "Hospital"), a non-profit medical organization, located in the City of Boston, has submitted to the Authority, at this meeting, its Development Plan dated December 1, 1973, as amended. Such Plan consists of a nineteen page document (hereinafter referred to as the "Plan"), and related map which is attached hereto and certified by the Secretary of the Authority to be part of such plan; and

WHEREAS, the purpose of such Plan submission is to obtain non-cash grants-in-aid credits for certain of the City's Urban Renewal projects for various expenditures made by the Hospital. Such credits being authorized under Section 112 of the Housing Act of 1949, as amended; and

WHEREAS, in connection with such submission, appropriate State and Federal regulations require the Authority to conduct a public hearing concerning such plan and make certain findings prior to approving such plan; and

WHEREAS, the Plan has been reviewed for conformity with the "1965-1975 General Plan for the City of Boston and the Regional Core", which was duly approved by the Authority at its meeting on March 11, 1965, and for consistency with local objectives respecting appropriate land uses, improved traffic, public transportation, public utilities, recreational and community facilities, and other public improvements; and



WHEREAS, the Authority has held a public hearing on Feb. 14, 1974, after due and proper notice and has received and heard extensive data, exhibits, views and opinions and has in a resolution adopted, and affirmed this date, made certain findings and conclusions concerning the Plan and the conditions of the area noted in such Plan; and

NOW, THEREFORE, BE IT RESOLVED that the Boston Redevelopment Authority, acting under and pursuant to its powers under the provisions of Chapter 121B as amended, and any other powers thereunto enabling, does hereby conclude and find from the following particular facts noted in such Plan.

1. That the Plan conforms to the comprehensive plan for the locality as a whole and to the workable program for community improvements, and is consistent with the aforesaid local objectives of the community.

2. Properties within the Plan area which have already been demolished or rehabilitated were blighted or deteriorating.

3. The Plan area as a whole was, prior to the demolition and rehabilitation of certain properties within it, blighted and deteriorating, and qualifies as an area outside an urban renewal project from which Section 112 credits may be obtained under the Housing Act.

4. The Plan area was, prior to the demolition and rehabilitation of certain properties within it, detrimental to safety, health, morals, welfare and sound growth of the Boston community.

5. The Plan shows that land or properties in the area for which credits will be claimed have or will be redeveloped or rehabilitated for hospital use.

6. The actions called for in the Plan will eliminate blight and deterioration within the Plan area, and will result in conditions that will be compatible with the plan for the West End Project.

7. In addition to the above findings, the Authority also has determined in accordance with Section 48, Chapter 121B of Massachusetts General Laws insofar as these determinations are applicable to the subject Development Plan and hereby finds that:

(a) the project area would not by private enterprise alone and without either government subsidy or the exercise of government powers be made available for urban renewal; (b) the proposed land uses and building requirements in the project area will afford maximum opportunity to privately financed urban renewal consistent with the sound needs of the locality as a whole; (c) the financial plan is sound; (d) the project area is a decadent, substandard or blighted open area (e) that the urban renewal plan is sufficiently complete, as required by section one; and (f) the relocation plan has been approved under chapter seventy-nine A.

8. The Authority has also determined that all feasible measures have been taken to avoid or minimize damage to the environment.

9. That Authority's Director, in cooperation with the Hospital, be authorized to supply any additional information concerning this Plan to the appropriate governmental bodies for purpose of obtaining required Plan approval by such bodies.



MEMORANDUM

January 31, 1974

TO: Boston Redevelopment Authority

FROM: Robert T. Kenney, Director

SUBJECT: Massachusetts General Hospital Development Plan

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The Massachusetts General Hospital has submitted to the Authority a Development Plan. This Plan encompasses the hospital's past and proposed plan of action in an area generally bounded by Cambridge Street, Charles Street, and Blossom Street, but including property on Nashua Street. It includes land which is or has been blighted and deteriorated.

As such, this Development Plan provides a basis for claiming as non-cash grants-in-aid to the West End Urban Renewal Project expenditures by the hospital for land acquisition, demolition and relocation. To date these eligible credits amount to \$3,074,649.

To receive credits for these expenditures, the Authority must resolve that the Hospital's Development Plan is in conformance with the City's Master Plan and approve the Plan after due notice and public hearing. After its approval by the Authority, the Development Plan must be approved by the City Council and the Massachusetts Department of Community Affairs.

We have determined that the Plan is in conformance with the City's Master Plan. It is therefore recommended that a public hearing on the subject development plan be conducted by the Authority, at its next Board Meeting, after public advertisement.

An appropriate vote follows.

VOTED: That a public hearing on the Massachusetts General Hospital Development Plan be held at the office of the Boston Redevelopment Authority at \_\_\_\_\_ P.M., 1974, and the Secretary is hereby authorized to advertise notice of this public hearing.



# THE MASSACHUSETTS GENERAL HOSPITAL

BOSTON 02114

CHARLES A. SANDERS, M.D.  
General Director



TELEPHONE (617) 726- 2100  
CABLE ADDRESS "MASSGENRAL"

January 17, 1974

Mr. Robert T. Kenney  
Director  
Boston Redevelopment Authority  
City Hall  
One City Hall Square  
Boston, Massachusetts 02201

Dear Mr. Kenney:

In response to your Department's request, the Trustees of The Massachusetts General Hospital have authorized me to submit to the Boston Redevelopment Authority a Development Plan dated December 1, 1973 which serves as preparation for the Hospital's future needs and developments within an area adjacent to the West End Urban Renewal Project in Boston.

It is the understanding of The Massachusetts General Hospital Board of Trustees that under the terms of the Housing Act of 1949, as amended, the preparation of development plans by hospitals, universities and other non-profit institutions is intended to provide suitable planning objectives within the framework of a city's general objectives. Therefore, the achievement of certain objectives of the enclosed Development Plan will entitle under current federal legislation the City of Boston and the Boston Redevelopment Authority to gain local non-cash grants-in-aid for its own renewal activities.

As you are aware, The Massachusetts General Hospital is working closely with the surrounding community and with the Massachusetts Eye & Ear Infirmary to accomplish the objectives described in the enclosed Development Plan. For this reason the Trustees have asked me to indicate to you that the Plan is approved and adopted by them with the understanding that approval by the necessary authorities, the Massachusetts Eye & Ear Infirmary

A NONPROFIT INSTITUTION

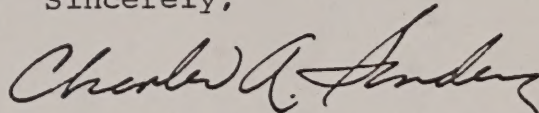
IN BOSTON: General Hospital • Baker Memorial • Phillips House • Burnham Memorial for Children • Huntington Memorial Hospital • Vincent Memorial Hospital IN BELMONT: McLean Hospital

January 17, 1974

and the surrounding community is necessary in order that the Development Plan may be implemented. With the aforementioned understanding in mind, the Trustees of The Massachusetts General Hospital have authorized and instructed me to present the enclosed Development Plan to the Boston Redevelopment Authority and request that the Authority make application for the applicable non-cash grants-in-aid. You may be assured that the appropriate authorities from the Hospital will be made available to you as may be required to support and promote this Plan for the purpose of gaining such credits.

Please feel free to contact my office for further information as may be necessary.

Sincerely,

A handwritten signature in dark ink, appearing to read "Charles A. Sanders". The signature is fluid and cursive, with a long, sweeping underline that extends downwards and to the right.

Charles A. Sanders, M.D.  
General Director

CAS:acm